| Fill in this information to identify your | case: | |
|---|---|---|
| United States Bankruptcy Court for the: DISTRICT OF MARYLAND | | |
| Case number (if known): | Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13 | ☐ Check if this is ar amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/22

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|----|--|-------------------------------|---|
| 1. | Your full name | | |
| | Write the name that is on your government-issued picture identification (for example, your driver's license or | Thomas First Name M. | First Name |
| | passport). | Middle Name | Middle Name |
| | | Chaffman | |
| | Bring your picture identification to your meeting | Last Name | Last Name |
| | with the trustee. | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| 2. | All other names you | | |
| | have used in the last 8 years | First Name | First Name |
| | Include your married or | Middle Name | Middle Name |
| | maiden names and any assumed, trade names and "doing business as" names. | Last Name | Last Name |
| | Do NOT list the name of any separate legal entity such as | First Name | First Name |
| | a corporation, partnership, or LLC that is not filing this | Middle Name | Middle Name |
| | petition. | Last Name | Last Name |
| | | | |
| | | Business name (if applicable) | Business name (if applicable) |
| | | Business name (if applicable) | Business name (if applicable) |

| Deb | otor 1 Thomas M. Chaffmar | 1 | Case number (if known) |
|-----|--|--|---|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 3. | Only the last 4 digits of your Social Security | xxx - xx - <u>4</u> <u>8</u> <u>1</u> <u>6</u> | xxx - xx |
| | number or federal Individual Taxpayer | OR | OR |
| | Identification number (ITIN) | 9xx - xx | 9xx - xx |
| 4. | Your Employer Identification Number (EIN), if any. | EIN | EIN |
| _ | | EIN | EIN |
| 5. | Where you live | | If Debtor 2 lives at a different address: |
| | | Number Street | Number Street |
| | | Brooklyn MD 21225 | Ott. Ott. 7D.O.d. |
| | | City State ZIP Code Baltimore City | City State ZIP Code |
| | | County | County |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to you at this mailing address. |
| | | Number Street | Number Street |
| | | P.O. Box | P.O. Box |
| | | City State ZIP Code | City State ZIP Code |
| 6. | Why you are choosing | Check one: | Check one: |
| | this district to file for bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | | I have another reason. Explain. (See 28 U.S.C. § 1408.) | I have another reason. Explain. (See 28 U.S.C. § 1408.) |
| Р | art 2: Tell the Court Abo | out Your Bankruptcy Case | |
| 7. | Bankruptcy Code you | Check one: (For a brief description of each, see for Bankruptcy (Form 2010)). Also, go to the top | Notice Required by 11 U.S.C. § 342(b) for Individuals Filing of page 1 and check the appropriate box. |
| | are choosing to file under | ☑ Chapter 7 | |
| | | Chapter 11 | |
| | | Chapter 12 | |
| | | Chapter 13 | |

| Thomas M. Chaffman | | nan | Case number (if known) | | | | | |
|--------------------|---|------------|--|---|--|---|---|--|
| 8. | How you will pay the fee |) | I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. | | | | | |
| | | | | | illments. If you choo Fee in Installments (C | | and attach the Application for | |
| | | L I | By law, a j han 150% ee in inst | judge may, but is no % of the official pove tallments). If you ch | t required to, waive y erty line that applies to | our fee, and may do o your family size ar must fill out the App | you are filing for Chapter 7. so only if your income is less d you are unable to pay the dication to Have the Chapter 7 | |
| 9. | Have you filed for | V | No | | | | | |
| | bankruptcy within the last 8 years? | | es. | | | | | |
| | | Distri | xt | | W | hen | Case number | |
| | | Distri | | | 10. | MM / DD / YYYY | 0 | |
| | | Distri | л | | vv | hen MM / DD / YYYY | Case number | |
| | | Distri | ;t | | W | hen MM / DD / YYYY | Case number | |
| 10. | Are any bankruptcy | V | No | | | | | |
| | cases pending or being filed by a spouse who is | | es. | | | | | |
| | not filing this case with you, or by a business | Debto | r | | | Relationsh | nip to you | |
| | partner, or by an | Distri | :t | | W | hen | Case number, | |
| | affiliate? | | | | | MM / DD / YYYY | if known | |
| | | Debto | r | | | Relationsh | nip to you | |
| | | Distri | ot | | w | hen | Case number, | |
| | | | | | | MM / DD / YYYY | if known | |
| 11. | Do you rent your | ☑ 「 | No. Go | to line 12. | | | | |
| | residence? | | es. Ha | as your landlord obtain | ined an eviction judgi | ment against you? | | |
| | | | | No. Go to line 12. | | | | |
| | | | | | l Statement About an of this bankruptcy pet | - | Against You (Form 101A) | |
| | | | | | | | | |

| Deb | tor 1 | Thomas M. Chaffma | an | | | | Case number (| (if known) | | |
|-----|--|--|-------------------|-----------------------------|---|--|---|--|--|---|
| P | art 3: | Report About Ar | ıy Bı | usine | sses You Own as a | a Sole P | roprietor | | | |
| 12. | | ı a sole proprietor ull- or part-time ss? | | | Go to Part 4. Name and location of b | ousiness | | | | |
| | busines | oroprietorship is a s you operate as an al, and is not a | | | Name of business, if any | | | | | |
| | separate | e legal entity such as ration, partnership, or | | | Number Street | | | | | |
| | - | ave more than one prietorship, use a | | | City | | | State | ZIP Cod | de |
| | | e sheet and attach it | | | Check the appropriate | box to de | scribe your business | • | | |
| | to tills p | Guion. | | | Single Asset Rea Stockbroker (as of | al Estate (a defined in er (as defir | efined in 11 U.S.C. § is defined in 11 U.S.C 11 U.S.C. § 101(53A) ned in 11 U.S.C. § 10 | C. § 101(51B) |) | |
| 13. | Chapte Bankru are you debtor | r filing under r 11 of the ptcy Code, and a small business or a debtor as by 11 U.S.C. | cho are mos | osing t a sma st rece | filing under Chapter 11, to proceed under Subch Il business debtor or you nt balance sheet, staten f these documents do no | apter V so u are choo nent of ope | that it can set appropriate to proceed under the proceed under the proceed under the process of | <i>priate deadlin</i> er Subchapter atement, and | es. If you V, you mu federal ind | indicate that you ust attach your come tax return |
| | § 1182(1)? | | No. | I am not filing under C | hapter 11. | | | | | |
| | For a definition of small business debtor, see 11 U.S.C. § 101(51D). | | | No. | I am filing under Chap the Bankruptcy Code. | ter 11, but | I am NOT a small bu | usiness debto | r accordin | g to the definition in |
| | | | | Yes. | I am filing under Chap Bankruptcy Code, and | | | | - | |
| | | | | Yes. | I am filling under Chapter 11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I choose to proceed under Subchapter V of Chapter 11. | | | | | |
| P | art 4: | Report If You Ov | vn o | r Hav | e Any Hazardous I | Property | or Any Propert | y That Nee | ds Imm | ediate Attention |
| 14. | propert alleged immine | own or have any y that poses or is to pose a threat of nt and identifiable to public health or | | No Yes. | What is the hazard? | | | | | |
| | safety? any pro | Or do you own perty that needs attention? | | | If immediate attention | is needed | , why is it needed? | | | |
| | perishal livestoc | mple, do you own ble goods, or k that must be fed, or | | | Where is the property? | | Ohrend | | | |
| | a buildir repairs? | ng that needs urgent | | | | Number | Street | | | |
| | | | | | | City | | | State | ZIP Code |

Debtor 1 Thomas M. Chaffman Case number (if known)

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

☑ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| ☐ I am not required to receive a briefing about credit counseling because of: | | | | | |
|---|----------------------------------|--|--|--|--|
| ☐ Incapacity. | I have a mental illness or a men | | | | |

Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case): You must check one:

certificate of completion.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

| Debtor 1 Thomas M. Chaffm | | an | | | Case number (if | Case number (if known) | | | |
|---------------------------|--|---|---|--|-----------------|--|--------|--|--|
| Р | art 6: | Answer These C | Quest | tions for Reporting P | urpos | ses | | | |
| 16. | What k have? | ind of debts do you | 16a | | dual pr | sumer debts? Consumer de rimarily for a personal, family, | | re defined in 11 U.S.C. § 101(8) usehold purpose." | |
| | | | 16b | | invest | iness debts? Business debt tment or through the operation | | debts that you incurred to obtain e business or investment. | |
| | | | 16c | s. State the type of debts y | ou owe | e that are not consumer or bus | siness | s debts. | |
| 17. | Are you | u filing under er 7? | No. I am not filing under Chapter 7. Go to line 18. | | | | | | |
| | any exc exclud- admini are pai availab | estimate that after empt property is ed and strative expenses d that funds will be ble for distribution ecured creditors? | V | - | | • | - | xempt property is excluded and to distribute to unsecured creditors? | |
| 18. | | any creditors do timate that you | | 1-49 50-99 100-199 200-999 | | 1,000-5,000 5,001-10,000 10,001-25,000 | | 25,001-50,000 50,001-100,000 More than 100,000 | |
| 19. | | uch do you te your assets to th? | | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion | |
| 20. | | uch do you te your liabilities to | | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion | |

| Debtor 1 | Thomas M. Chaffm | ıan | Case number (i | Case number (if known) | | | |
|----------|------------------|--|------------------------------|--|--|--|--|
| Part 7: | Sign Below | | | | | | |
| or you | _ | I have examined this petition, and I declarand correct. | are under penalty of perju | ry that the information provided is true | | | |
| | | If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. | | | | | |
| | | If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). | | | | | |
| | | I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. | | | | | |
| | | I understand making a false statement, connection with a bankruptcy case can re or both. 18 U.S.C. §§ 152, 1341, 1519, a | esult in fines up to \$250,0 | | | | |
| | | X /s/ Thomas M. Chaffman Thomas M. Chaffman, Debtor 1 | X Signa | ture of Debtor 2 | | | |
| | | Executed on 03/30/2023 MM / DD / YYYY | Execu | uted on | | | |

| Debtor 1 Thomas M. Chaff | man | Case number (if know | n) | | | |
|---|--|---------------------------|------------------------------|--|--|--|
| For your attorney, if you are represented by one If you are not represented by an attorney, you do not need to file this page. | I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect. | | | | | |
| | X /s/ Kim Parker Signature of Attorney for Debtor | Date | 03/30/2023 MM / DD / YYYY | | | |
| | Kim Parker Printed name Law Offices of Kim Parker, Parker, Parker Firm Name 2123 Maryland Ave Number Street | A | | | | |
| | Baltimore City | MD State | ZIP Code | | | |
| | Contact phone (410) 234-2621 | Email address kp@k | imparkerlaw.com | | | |
| | 23894 Bar number | MD State | _ | | | |

| Fill in this inf | ormation to | identify you | ur case and t | his filing: | | |
|---------------------------------|---------------------------|-----------------|--------------------------------|---------------------------------------|--|---------------------------------------|
| Debtor 1 | Thomas | М. | CI | naffman | | |
| | First Name | Middle N | ame La | st Name | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle N | ame La: | st Name | | |
| | | | | | | |
| United States Bar | nkruptcy Court f | or the: DISTR | ICT OF MARY | LAND | | |
| Case number (if known) | | | | | _ | if this is an led filing |
| | | | | | | |
| Official Form | 106A/B | | | | | |
| Schedule A/ | B: Proper | ty | | | | 12/15 |
| Part 1: Des | On the top of Scribe Each | any additiona | Building, La | our name and case numb | space is needed, attach a sper (if known). Answer eventate You Own or Have | ry question. |
| <u> </u> | ere is the prope | erty? | | | | |
| | | | | entries from Part 1, inclunumber here | | \$0.00 |
| entries for pa | iges you nave a | attacheu for Pa | art i. Wille tilat | number nere | | |
| Part 2: Des | scribe Your | Vehicles | | | | |
| you own that some | one else drives. | If you lease a | - | port it on Schedule G: Exec | registered or not? Include cutory Contracts and Unexpi | • |
| 3.1. | | v | Who has an inte | rest in the property? | Do not deduct secured clai | ms or exemptions. Put the |
| Make: | Equinox | | Check one. | | amount of any secured cla | ims on Schedule D: |
| Model: | | | Debtor 1 only | | Creditors Who Have Claim | |
| Year: | 2014 | [[| ☐ Debtor 2 only☐ Debtor 1 and | Debtor 2 only | Current value of the entire property? | Current value of the portion you own? |
| Approximate milea | ge: | | | of the debtors and another | \$2,500.00 | \$2,500.00 |
| Other information: | | | | | | |
| 2014 Equinox - t | itled jointly w | /daughter [| Check if this (see instruction | is community property ons) | | |
| 3.2. | | V | | rest in the property? | Do not deduct secured clai | ms or exemptions. Put the |
| Make: | Honda | | Check one. | | amount of any secured claim | |
| Model: | Pilot | [| Debtor 1 only | | Creditors Who Have Claim | |
| Year: | 2013 | [| ☐ Debtor 2 only☐ Debtor 1 and | Debtor 2 only | Current value of the entire property? | Current value of the portion you own? |
| Approximate milea | ge: 140,000 | [| | of the debtors and another | \$3,200.00 | \$3,200.00 |
| Other information: | | • | | | | |
| 2013 Honda Pilo miles) | ot (approx. 14 | 0,000 [| Check if this (see instruction | is community property ons) | | |
| Needs a new en is approximately | - | ed repair | • | | | |

| Deb | otor 1 | Thomas M. Chaffman | Case number (if known) |
|-----|-------------------|---|--|
| 4. | | raft, aircraft, motor homes, ATVs and other recreational vehicles, oes: Boats, trailers, motors, personal watercraft, fishing vessels, snowm | |
| 5. | Add the | dollar value of the portion you own for all of your entries from Parfor pages you have attached for Part 2. Write that number here | |
| В | | · · | |
| P | art 3: | Describe Your Personal and Household Items | Command value of the |
| Do | you own | or have any legal or equitable interest in any of the following items | s? Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 6. | | old goods and furnishings es: Major appliances, furniture, linens, china, kitchenware | |
| | ✓ No ☐ Yes | . Describe | |
| 7. | Electro Exampl | nics es: Televisions and radios; audio, video, stereo, and digital equipment music collections; electronic devices including cell phones, camera | · |
| | □ No ☑ Yes | . Describe cell phone; computer | \$150.00 |
| 8. | | bles of value s: Antiques and figurines; paintings, prints, or other artwork; books, pi stamp, coin, or baseball card collections; other collections, memora | • |
| | ✓ No ☐ Yes | . Describe | |
| 9. | | ent for sports and hobbies es: Sports, photographic, exercise, and other hobby equipment; bicycle canoes and kayaks; carpentry tools; musical instruments | es, pool tables, golf clubs, skis; |
| | ✓ No ☐ Yes | . Describe | |
| 10. | Firearm Exampl | s es: Pistols, rifles, shotguns, ammunition, and related equipment | |
| | | . Describe | |
| 11. | Clothes Exampl | es: Everyday clothes, furs, leather coats, designer wear, shoes, access | sories |
| | | Describe pants; shoes; shirts; coats | \$200.00 |
| 12. | Jewelry Exampl | es: Everyday jewelry, costume jewelry, engagement rings, wedding ring gold, silver | gs, heirloom jewelry, watches, gems, |
| | ✓ No ☐ Yes | . Describe | |

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| Deb | tor 1 | Thomas M. Cha | ffman | | | Case number (if known) | |
|-----|----------------|---|-------------|---------------------------------------|------------------------|---|---|
| 13. | | rm animals les: Dogs, cats, bird | ds, horses | | | | |
| | ✓ No | • | • | | | | |
| 14. | Any otl | | ousehold | items you did not alre | eady list, including a | ny health aids you | |
| | | s. Give specific | | | | | |
| 15. | | | | ntries from Part 3, inc | | or pages you have | \$350.00 |
| Pa | art 4: | Describe You | ır Financ | cial Assets | | | |
| Doy | ou own | or have any legal | or equitat | ole interest in any of t | he following? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 16. | Cash Exampl | les: Money you hav petition | e in your w | allet, in your home, in a | a safe deposit box, ar | nd on hand when you file your | |
| | ✓ No ☐ Yes | | | | | Cash: | |
| 17. | • | _ | ses, and ot | | | shares in credit unions, accounts with the same | |
| | □ No ☑ Yes | S | | Institution name: | | | |
| | 17 | .1. Checking acc | ount: | Checking account | - PNC | | \$30.00 |
| 18. | | , mutual funds, or բ /es: Bond funds, inv | | aded stocks ccounts with brokerage | e firms, money market | t accounts | |
| | ✓ No ☐ Yes | S | Institution | n or issuer name: | | | |
| 19. | | ıblicly traded stock rest in an LLC, par | | | and unincorporated | businesses, including | |
| | info | s. Give specific ormation about m | Name of | entity: | | % of ownership | : |

| Deb | btor 1 Thomas M. Chaffman | Case number (if known) |) | |
|-----|--|---|-------------|---|
| 20. | Government and corporate bonds and other negotiable and r Negotiable instruments include personal checks, cashiers' check Non-negotiable instruments are those you cannot transfer to som | s, promissory notes, and money orders. | | |
| | ✓ No ☐ Yes. Give specific information about them | | | |
| 21. | Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift profit-sharing plans | savings accounts, or other pension or | | |
| | ✓ No✓ Yes. List eachaccount separately. Type of account: Institution name | ne: | | |
| 22. | Security deposits and prepayments Your share of all unused deposits you have made so that you ma Examples: Agreements with landlords, prepaid rent, public utilitie companies, or others | | | |
| | ☑ No | and the defendable of | | |
| 23. | ☐ Yes Institution name of Annuities (A contract for a specific periodic payment of money № No | | rs) | |
| 24 | Yes Issuer name and description: Interests in an education IRA, in an account in a qualified AB | RI E program or under a qualified state to | uition pro | ogram |
| 24. | 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). | te program, or under a qualified state to | altion pro | gram. |
| | ✓ No ☐ Yes Institution name and description. Se | eparately file the records of any interests. | 11 U.S.C. | § 521(c) |
| 25. | Trusts, equitable or future interests in property (other than a powers exercisable for your benefit | | | ., |
| | ✓ No ☐ Yes. Give specific information about them | | | |
| 26. | Patents, copyrights, trademarks, trade secrets, and other interest and communication of the secrets and communication of the secret an | | | |
| | ✓ No ☐ Yes. Give specific information about them | | | |
| 27. | Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative ass | sociation holdings, liquor licenses, profession | onal licens | ses |
| | ✓ No ☐ Yes. Give specific information about them | | | |
| Mor | oney or property owed to you? | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax refunds owed to you | | | |
| | □ No | | | |
| | | ax Refund. Amt: \$3,931.00 | Federal | |
| | you already filed the returns and the tax years | | State: | \$0.00 |
| | and the tax years | | Local: | \$0.00 |

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| Deb | otor 1 Thomas M. Chaffman Case number | r (if known) |
|-----|---|--|
| 29. | Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce | settlement, property settlement |
| | ✓ No✓ Yes. Give specific information | Alimony: |
| | Tes. Give specific information | Maintenance: |
| | | Support: |
| | | Divorce settlement: |
| | | |
| 20 | Other amounts company ourse var | Property settlement: |
| 30. | Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation payments, disability benefits, disabili | ay, workers' |
| | ✓ No Yes. Give specific information | |
| 31. | Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowners | 's, or renter's insurance |
| | No Yes. Name the insurance company of each policy and list its value Company name: Beneficiary: | Surrender or refund value: |
| 32. | Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are cur entitled to receive property because someone has died | rently |
| | ✓ No ☐ Yes. Give specific information | |
| 33. | Claims against third parties, whether or not you have filed a lawsuit or made a demand for Examples: Accidents, employment disputes, insurance claims, or rights to sue | payment |
| | ✓ No Yes. Describe each claim | |
| 34. | Other contingent and unliquidated claims of every nature, including counterclaims of the drights to set off claims | ebtor and |
| | ✓ No Yes. Describe each claim | |
| 35. | Any financial assets you did not already list | |
| | ✓ No ☐ Yes. Give specific information | |
| 36. | Add the dollar value of all of your entries from Part 4, including any entries for pages you lattached for Part 4. Write that number here | nave \$3,961.00 |
| P | art 5: Describe Any Business-Related Property You Own or Have an Interest | est In. List any real estate in Part 1 |
| 37. | Do you own or have any legal or equitable interest in any business-related property? | |
| | ✓ No. Go to Part 6.✓ Yes. Go to line 38. | |

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| Deb | tor 1 | Thomas M. Chaffma | Case number (if know | n) |
|-----|---------------|---|---|--|
| | | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 38. | Accoun | ts receivable or comm | issions you already earned | |
| | ✓ No ☐ Yes | . Describe | | |
| 39. | Example | quipment, furnishings es: Business-related co desks, chairs, electr | mputers, software, modems, printers, copiers, fax machines, rugs, telepho | ones, |
| | ✓ No ☐ Yes | . Describe | | |
| 40. | Machine | ery, fixtures, equipmer | nt, supplies you use in business, and tools of your trade | |
| | ✓ No ☐ Yes | . Describe | | |
| 41. | Invento | ry | | |
| | ✓ No ☐ Yes | . Describe | | |
| 42. | Interest | s in partnerships or jo | int ventures | |
| | √ No | | | |
| | لكا | . Describe Name of | entity: % of ow | nership: |
| 43. | Custom | er lists, mailing lists, o | or other compilations | |
| | ✓ No ☐ Yes | . Do your lists include No Yes. Describe | personally identifiable information (as defined in 11 U.S.C. § 101(41A |)))? |
| 44 | A b | | | |
| 44. | ✓ No | . Give specific informat | y you did not already list | |
| 45. | | _ | our entries from Part 5, including any entries for pages you have number here | → \$0.00 |
| Pa | | | n- and Commercial Fishing-Related Property You Own on n interest in farmland, list it in Part 1. | Have an Interest In. |
| 46. | Do you | own or have any legal | or equitable interest in any farm- or commercial fishing-related prope | erty? |
| | ✓ No. | Go to Part 7. Go to line 47. | - , , | |

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| Deb | tor 1 | Thomas M. Cha | ffman | Case number (if known) | |
|-----|---------------|--------------------------------|---|--|---|
| | | | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 47. | Farm ar | nimais es: Livestock, poult | try farm-raised fish | | |
| | ✓ No ☐ Yes | | .,, | |] |
| 48. | Crops | either growing or | harvested | | |
| | _ | . Give specific | | |] |
| 49. | Farm ar | nd fishing equipme | ent, implements, machinery, fixtures | , and tools of trade | |
| | ✓ No ☐ Yes | | | |] |
| 50. | Farm ar | nd fishing supplies | s, chemicals, and feed | | |
| | ✓ No ☐ Yes | | | |] |
| 51. | Any far | m- and commercia | ıl fishing-related property you did no | ot already list | |
| | | . Give specific | | |] |
| 52. | | | of your entries from Part 6, including that number here | g any entries for pages you have | \$0.00 |
| Pa | art 7: | Describe All Pr | operty You Own or Have an I | nterest in That You Did Not List Above | |
| 53. | | | ty of any kind you did not already lis country club membership | st? | |
| | ✓ No ☐ Yes | . Give specific info | rmation. | | |
| 54. | Add the | dollar value of all | of your entries from Part 7. Write th | nat number here | \$0.00 |

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| Debtor 1 | Thomas M. Chaffman | Case no | umber (if known) | |
|------------|---|-------------|------------------------------|--------------|
| Part 8: | List the Totals of Each Part of this Form | | | |
| 55. Part 1 | l: Total real estate, line 2 | | → | \$0.00 |
| 56. Part 2 | 2: Total vehicles, line 5 | \$5,700.00 | | |
| 57. Part 3 | 3: Total personal and household items, line 15 | \$350.00 | | |
| 58. Part 4 | I: Total financial assets, line 36 | \$3,961.00 | | |
| 59. Part 5 | 5: Total business-related property, line 45 | \$0.00 | | |
| 60. Part 6 | 6: Total farm- and fishing-related property, line 52 | \$0.00 | | |
| 61. Part 7 | 7: Total other property not listed, line 54 | +\$0.00 | | |
| 62. Total | personal property. Add lines 56 through 61 | \$10,011.00 | Copy personal property total | +\$10,011.00 |
| 63. Total | of all property on Schedule A/B. Add line 55 + line 6 | 2 | | \$10,011.00 |

| Debtor 2 (Spouse, if filing) | Thomas First Name | | | | | |
|--|--|--|---|-------------------------|--|---|
| (Spouse, if filing) United States Ban | riistivaille | M. Middle Name | Chaffma e Last Name | n | | |
| United States Ban | First Name | Middle Name | e Last Name | | | |
| | | | T OF MARYLAND | | | Chook if this is an |
| (if known) | | | | | | Check if this is an amended filing |
| Official Form | 106C | | | | | |
| Schedule C: | The Prope | rty You Cl | aim as Exemp | ot | | 04/2 |
| Using the property y | you listed on <i>Sch</i> I out and attach t | nedule A/B: Prop to this page as m | erty (Official Form 10 | 6A/B) | as your source, list the | esponsible for supplying correct information e property that you claim as exempt. If mor ssary. On the top of any additional pages, |
| exempted up to the receive certain ber exemption of 100% property is determ | e amount of any nefits, and tax-e 6 of fair market v ined to exceed t | applicable stat xempt retireme value under a la that amount, yo | tutory limit. Some ex nt fundsmay be unl aw that limits the exe | kemp limite empti | tionssuch as those to the din dollar amount. H | value of the property being for health aids, rights to lowever, if you claim an ar amount and the value of the e statutory amount. |
| | | | | | if is filler. | |
| ☑ You are c | - | d federal nonban | kruptcy exemptions. J.S.C. § 522(b)(2) | | if your spouse is filing S.C. § 522(b)(3) | witn you. |
| _ | _ | | | npt, 1 | fill in the information I | pelow. |
| Brief description o Schedule A/B that | of the property a | nd line on | Current value of the portion you own | Am | ount of the mption you claim | Specific laws that allow exemption |
| | | | Copy the value from Schedule A/B | | eck only one box for h exemption | |
| | | | | | | |
| Brief description: | | | \$2,500.00 | V | \$2,500.00 | Md. Code Ann., Cts. & Jud. Proc. § |
| Brief description: 2014 Equinox - ti Line from <i>Schedule</i> | - | daughter | \$2,500.00 | | \$2,500.00 100% of fair market value, up to any applicable statutory limit | Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(5) |

| Debtor 1 | Thomas M. Chaffman | Case number (if known) | | | | |
|---|--------------------------------|--|---|---|---|--|
| Part 2: | Additional Page | | | | | |
| Brief description of the property and line on Schedule A/B that lists this property | | Current value of the portion you own | | | Specific laws that allow exemption | |
| | | Copy the value from Schedule A/B | | eck only one box for h exemption | | |
| Brief descri | iption: e; computer | \$150.00 | | \$150.00 100% of fair market | Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(4) | |
| Line from S | Schedule A/B: 7 | | value, up to any applicable statutory limit | | | |
| - | oes; shirts; coats | \$200.00 | | \$200.00 100% of fair market value, up to any | Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(4) | |
| Line from S | Schedule A/B: 11 | | | applicable statutory | | |
| Brief descri | iption: account - PNC | \$30.00 | <u> </u> | \$30.00 100% of fair market | Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(5) | |
| Line from Schedule A/B: 17.1 | | | | value, up to any applicable statutory limit | | |
| Brief descri | iption: eral Tax Refund | \$3,931.00 | \square | \$270.00 100% of fair market | Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(5) | |
| | nption claimed for this asset) | | Ш | value, up to any | 11-30 4 (b)(3) | |
| Line from S | Schedule A/B: 28 | | | applicable statutory limit | | |
| Brief descri | iption: eral Tax Refund | \$3,931.00 | V | \$3,661.00 | Md. Code Ann., Cts. & Jud. Proc. § | |
| | nption claimed for this asset) | | | 100% of fair market value, up to any | 11-504(f)(1)(i)(1) | |
| - | Schedule A/B: 28 | | | applicable statutory | | |

| Fill in this in | formation to identi | fy your case | e: | | | | |
|---|---|--|---|------------------------------------|-----------------------|---|-----------------------------------|
| Debtor 1 | | M. ⁄liddle Name | Chaffman Last Name | | | | |
| Debtor 2 | | vidule Name | Last Name | | | | |
| (Spouse, if filing |) First Name I | ⁄Iiddle Name | Last Name | | | | |
| | ankruptcy Court for the: <u>I</u> | DISTRICT OF | MARYLAND | — | | | |
| Case number (if known) | | | | | | Check if this i amended filing | |
| Official Forn | n 106D | | | | | | |
| Schedule D | : Creditors Who | Have Cla | ims Secured by | / Prope | rty | | 12/15 |
| correct informati On the top of any 1. Do any cred No. Ch | on. If more space is ne additional pages, write itors have claims secur | eded, copy the e your name ar red by your pro his form to the | ed people are filing tog e Additional Page, fill it nd case number (if know operty? court with your other sch | out, numb vn). | er the entr | ies, and attach it to th | s form. |
| Part 1: Lis | st All Secured Clair | ns | | | | | |
| claim, list the creditor has a | red claims. If a creditor creditor separately for ea particular claim, list the sible, list the claims in alme. | ach claim. If m other creditors phabetical orde | ore than one in Part 2. As r according to the | Column A Amount Do not de value of | of claim educt the | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |
| 2.1 | | Describe the secures the | e property that claim: | | | | |
| Creditor's name | | _ | | | | | |
| Number Street | | _ | | | | | |
| | | | te you file, the claim is: | Check all | that apply. | | |
| | | Continge | | | | | |
| City | State ZIP Code | Disputed | | | | | |
| Who owes the de Debtor 1 only | ebt? Check one. | | en. Check all that apply. ement you made (such as | e mortango | or cocuros | Lear Joan) | |
| Debtor 2 only | D | _ | / lien (such as tax lien, m | | | real loan) | |
| ☐ Debtor 1 and ☐ At least one o | Debtor 2 only f the debtors and anothe | , U | nt lien from a lawsuit | | | | |
| _ | claim relates | Other (in | cluding a right to offset) | | | | |
| Date debt was in | curred | Last 4 digits | of account number | | | | |
| | | | | | | | |
| Add the dollar va that number here | llue of your entries in C | olumn A on th | s page. Write | | \$0.00 | | |
| | page of your form, add that number here: | the dollar valu | e totals from | | \$0.00 | Ī | |

Official Form 106D

| Fill in this inf | formation to i | dentify your c | 2001 | | | |
|---|---|---|---|--|--|---|
| | | | | | | |
| Debtor 1 | Thomas First Name | M. Middle Name | Chaffman Last Name | | | |
| | 1 list Name | Wilddie Hame | Lastivanie | | | |
| Debtor 2 (Spouse, if filing) | First Namo | Middle Name | Last Name | | | |
| (Spouse, il lillig) | i ii st ivairie | Middle Name | Lastivairie | | | |
| United States Ba | nkruptcy Court fo | r the: DISTRICT | OF MARYLAND | | | |
| Case number | | | | _ | . | |
| (if known) | | | | _ | Check if this i amended filin | |
| Official Form | 106E/F | | | | | |
| Schedule E/ | F: Creditor | s Who Have | e Unsecured Claims | | | 12/15 |
| If more space is n to this page. On t | eeded, copy the he top of any ad | Part you need, fi Iditional pages, w | claims that are listed in Schedul Il it out, number the entries in the rite your name and case number secured Claims | boxes on the left. A | | |
| 1. Do any credit | tors have priorit | y unsecured clair | ns against you? | | | |
| No. Got | to Part 2. | | | | | |
| ☐ Yes. | | | | | | |
| claim. For ea show both pric more space is claim, list the | ch claim listed, ic ority and nonprior s needed for prior other creditors in | lentify what type of ity amounts. As m ity unsecured clair Part 3. | creditor has more than one priority folaim it is. If a claim has both prionuch as possible, list the claims in ans, fill out the Continuation Page of expensions for this form in the instructions for this form in the instructions. | rity and nonpriority an Ilphabetical order acc Part 1. If more than truction booklet. | nounts, list that coording to the cred | laim here and ditor's name. If s a particular |
| | | | | Total claim | Priority amount | Nonpriority amount |
| 2.1 | | | | | amount | amount |
| | | | Last 4 digits of account number | | | |
| Priority Creditor's Nam | ie | | Last 4 digits of account number | | | |
| Number Street | | | When was the debt incurred? | | _ | |
| | | | As of the date you file, the claim | is: Check all that ap | ply. | |
| | | | Contingent | | | |
| | | | Unliquidated | | | |
| City | State | ZIP Code | Disputed | | | |
| Who incurred the | debt? Check | one. | Type of PRIORITY unsecured cl | aim: | | |
| Debtor 1 only | | | ■ Domestic support obligations | | | |
| Debtor 2 only Debtor 1 and D | Debtor 2 only | | Taxes and certain other debts | | nent | |
| | the debtors and | another | Claims for death or personal i | njury while you were | | |
| _ | claim is for a co | nmunity debt | Other. Specify | | | |
| Is the claim subje | | - | _ · / | | | |
| □ No | | | | | | |
| Yes | | | | | | |

| Debtor 1 Thomas M. Chaffman | Case number (if known) |
|---|--|
| Part 2: List All of Your NONPRIORIT | Y Unsecured Claims |
| Yes 4. List all of your nonpriority unsecured claims If a creditor has more than one nonpriority unse type of claim it is. Do not list claims already inc Part 3. If more space is needed for nonpriority | in the alphabetical order of the creditor who holds each claim. cured claim, list the creditor separately for each claim. For each claim listed, identify what cluded in Part 1. If more than one creditor holds a particular claim, list the other creditors in unsecured claims, fill out the Continuation Page of Part 2. Total claim |
| Ally Financial, Inc Nonpriority Creditor's Name Attn: Bankruptcy Number Street 500 Woodard Ave Detroit MI 48226 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes | Last 4 digits of account number 5 5 3 7 When was the debt incurred? 05/2017 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Automobile |
| Amex Nonpriority Creditor's Name Correspondence/Bankruptcy Number Street PO Box 981540 EI Paso TX 79998 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes | \$0.00 Last 4 digits of account number 1 1 9 3 When was the debt incurred? 01/2020 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card |

| Debtor 1 Thomas M. Chaffman | Case number (if known) | |
|---|---|-------------|
| Part 2: Your NONPRIORITY Unsecu | red Claims Continuation Page | |
| After listing any entries on this page, number the previous page. | m sequentially from the | Total claim |
| 4.3 | | \$14,913.00 |
| Bank of America | Last 4 digits of account number 4 0 2 4 | |
| Nonpriority Creditor's Name | When was the debt incurred? 05/2012 | |
| Attn: Bankruptcy Number Street | As of the date you file, the claim is: Check all that apply. | |
| 4909 Savarese Circle | _ ☑ Contingent | |
| | ☐ Unliquidated ☐ ☐ Disputed | |
| Tampa FL 33634 | | |
| City State ZIP Code | Type of NONPRIORITY unsecured claim: | |
| Who incurred the debt? Check one. Debtor 1 only | Student loans | |
| Debtor 2 only | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| Debtor 1 and Debtor 2 only | Debts to pension or profit-sharing plans, and other similar debts | |
| At least one of the debtors and another | Other. Specify | |
| Check if this claim is for a community debt | Credit Card | |
| Is the claim subject to offset? | | |
| ☑ No ☐ Yes | | |
| | | |
| 4.4 | | \$4,915.00 |
| Capital One | Last 4 digits of account number2023_ | |
| Nonpriority Creditor's Name Attn: Bankruptcy | When was the debt incurred? 07/2014 | |
| Number Street | As of the date you file, the claim is: Check all that apply. | |
| PO Box 30285 | _ Contingent | |
| | ☐ Unliquidated ☐ ☐ Disputed | |
| Salt Lake City UT 84130 | — — — — — — — — — — — — — — — — — — — | |
| City State ZIP Code Who incurred the debt? Check one. | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 only | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce | |
| Debtor 2 only | that you did not report as priority claims | |
| Debtor 1 and Debtor 2 only At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar debts | |
| Check if this claim is for a community debt | ✓ Other. Specify | |
| Is the claim subject to offset? | Credit Card | |
| No | | |
| Yes | | |
| | | |
| 4.5 | | \$0.00 |
| Capital One Nonpriority Creditor's Name | Last 4 digits of account number | |
| Attn: Bankruptcy | When was the debt incurred? 07/24/2014 | |
| Number Street PO Box 30285 | As of the date you file, the claim is: Check all that apply. | |
| 10 Box 00200 | | |
| 0-141 -1 0'4 UT 04400 | — ☑ Disputed | |
| Salt Lake City UT 84130 City State ZIP Code | Type of NONPRIORITY unsecured claim: | |
| Who incurred the debt? Check one. | Student loans | |
| Debtor 1 only | Obligations arising out of a separation agreement or divorce | |
| Debtor 2 only Debtor 1 and Debtor 2 only | that you did not report as priority claims | |
| At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar debts | |
| Check if this claim is for a community debt | ✓ Other. Specify Credit Card | |
| Is the claim subject to offset? | | |
| ☑ No | | |
| ☐ Yes | | |

| Debtor 1 Thomas M. Chaffman | Case number (if known) | |
|---|---|-------------|
| Part 2: Your NONPRIORITY Unsecu | red Claims Continuation Page | |
| After listing any entries on this page, number the previous page. | m sequentially from the | Total claim |
| 4.6 | | \$0.00 |
| CarMax Auto Finance | Last 4 digits of account number 6 4 1 7 | Ψ0.00 |
| Nonpriority Creditor's Name | When was the debt incurred? 08/2016 | |
| Attn: Bankruptcy Number Street | As of the date you file, the claim is: Check all that apply. | |
| PO Box 440609 | _ ☐ Contingent | |
| | Unliquidated | |
| Kennesaw GA 30160 | ─ ☑ Disputed | |
| City State ZIP Code | Type of NONPRIORITY unsecured claim: | |
| Who incurred the debt? Check one. Debtor 1 only | ☐ Student loans | |
| Debtor 2 only | Obligations arising out of a separation agreement or divorce | |
| Debtor 1 and Debtor 2 only | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| At least one of the debtors and another | ☐ Other. Specify | |
| ☐ Check if this claim is for a community debt | Automobile | |
| Is the claim subject to offset? | | |
| ☑ No ☐ Yes | | |
| 4.7 | | \$0.00 |
| CarMax Auto Finance | Last 4 digits of account number 8 3 0 5 | <u> </u> |
| Nonpriority Creditor's Name | Last 4 digits of account number 8 3 0 5 When was the debt incurred? 02/2017 | |
| Attn: Bankruptcy Number Street | As of the date you file, the claim is: Check all that apply. | |
| Number Street PO Box 440609 | Contingent | |
| | Unliquidated | |
| Kennesaw GA 30160 | ─ 🔽 Disputed | |
| Kennesaw GA 30160 City State ZIP Code | Type of NONPRIORITY unsecured claim: | |
| Who incurred the debt? Check one. | Student loans | |
| Debtor 1 only Debtor 2 only | Obligations arising out of a separation agreement or divorce | |
| Debtor 2 only Debtor 1 and Debtor 2 only | that you did not report as priority claims | |
| At least one of the debtors and another | ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify | |
| Check if this claim is for a community debt | Automobile | |
| Is the claim subject to offset? | | |
| ✓ No | | |
| Yes | | |
| 4.8 | | \$0.00 |
| Citibank/Office Depot | Last 4 digits of account number 5 4 0 0 | |
| Nonpriority Creditor's Name Citicorp Credit Srvs/Centralized Bk dept | When was the debt incurred? 07/2011 | |
| Number Street | As of the date you file, the claim is: Check all that apply. | |
| PO Box 7032 | _ Contingent | |
| | ☐ Unliquidated ☐ ☐ Disputed | |
| Sioux Falls SD 57117 | Disputed | |
| City State ZIP Code Who incurred the debt? Check one. | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 only | Student loans Obligations grising out of a congretion agreement or diverse | |
| Debtor 2 only | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| Debtor 1 and Debtor 2 only | Debts to pension or profit-sharing plans, and other similar debts | |
| At least one of the debtors and another | Other. Specify | |
| Check if this claim is for a community debt | Charge Account | |
| Is the claim subject to offset? ✓ No | | |
| Yes | | |

| Debtor 1 Thomas M. Chaffman | Case number (if known) | |
|--|---|-------------|
| Part 2: Your NONPRIORITY Unsecur | red Claims Continuation Page | |
| After listing any entries on this page, number ther previous page. | m sequentially from the | Total claim |
| 4.9 | | \$4,417.00 |
| Discover Financial | Last 4 digits of account number 2 1 6 3 | |
| Nonpriority Creditor's Name | When was the debt incurred? 01/2020 | |
| Attn: Bankruptcy Number Street | As of the date you file, the claim is: Check all that apply. | |
| PO Box 3025 | _ ✓ Contingent | |
| | Unliquidated | |
| New Albany OH 43054 | Disputed | |
| City State ZIP Code | Type of NONPRIORITY unsecured claim: | |
| Who incurred the debt? Check one. | ☐ Student loans | |
| Debtor 1 only | Obligations arising out of a separation agreement or divorce | |
| Debtor 2 only Debtor 1 and Debtor 2 only | that you did not report as priority claims | |
| At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar debts | |
| Check if this claim is for a community debt | Other. Specify | |
| Is the claim subject to offset? | Credit Card | |
| No No | | |
| Yes | | |
| | | |
| 4.10 | | \$0.00 |
| Lendmark | Last 4 digits of account number 9 5 0 4 | _ |
| Nonpriority Creditor's Name 2118 Usher St. | When was the debt incurred? 11/2013 | |
| Number Street | As of the date you file, the claim is: Check all that apply. | |
| | _ Contingent | |
| | Unliquidated | |
| Covington GA 30014 | ─ 🗹 Disputed | |
| City State ZIP Code | Type of NONPRIORITY unsecured claim: | |
| Who incurred the debt? Check one. | Student loans | |
| Debtor 1 only Debtor 2 only | Obligations arising out of a separation agreement or divorce | |
| Debtor 1 and Debtor 2 only | that you did not report as priority claims | |
| At least one of the debtors and another | ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify | |
| Check if this claim is for a community debt | Automobile | |
| Is the claim subject to offset? | | |
| ⋈ No | | |
| Yes | | |
| 4.11 | | |
| | | \$0.00 |
| Lendmark Financial Ser Nonpriority Creditor's Name | _ Last 4 digits of account number _2 _6 _0 _3 | |
| 2118 Usher St. | When was the debt incurred? 05/2019 | |
| Number Street | As of the date you file, the claim is: Check all that apply. | |
| | _ | |
| | Unliquidated | |
| Covington GA 30014 | _ <u> </u> | |
| City State ZIP Code Who incurred the debt? Check one. | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 only | Student loans | |
| Debtor 2 only | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| Debtor 1 and Debtor 2 only | Debts to pension or profit-sharing plans, and other similar debts | |
| At least one of the debtors and another | Other. Specify | |
| ☐ Check if this claim is for a community debt | Unsecured | |
| Is the claim subject to offset? | | |
| ☑ No | | |
| Yes | | |

| Debtor 1 Thomas M. Chaffman | Case number (if known) | |
|---|--|--------------|
| Part 2: Your NONPRIORITY Unsecu | red Claims Continuation Page | |
| After listing any entries on this page, number the previous page. | m sequentially from the | Total claim |
| 4.12 | | \$18,212.00 |
| Navy FCU | Last 4 digits of account number 7 0 2 9 | |
| Nonpriority Creditor's Name | When was the debt incurred? 11/2018 | |
| Attn: Bankruptcy Number Street | As of the date you file, the claim is: Check all that apply. | |
| P.O. Box 3000 | _ ☑ Contingent | |
| | Unliquidated | |
| Merrifield VA 22119 | Disputed | |
| City State ZIP Code | Type of NONPRIORITY unsecured claim: | |
| Who incurred the debt? Check one. | ☐ Student loans | |
| Debtor 1 only Debtor 2 only | Obligations arising out of a separation agreement or divorce | |
| Debtor 1 and Debtor 2 only | that you did not report as priority claims | |
| At least one of the debtors and another | ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify | |
| Check if this claim is for a community debt | ✓ Other. Specify Credit Card | |
| Is the claim subject to offset? | 3.34.4 | |
| ☑ No | | |
| Yes | | |
| 4.13 | | #0.00 |
| | Last 4 digits of account number 1 8 5 0 | \$0.00 |
| Ocwen Loan Servicing, LLC Nonpriority Creditor's Name | | |
| 1661 Worthington Road | | |
| Number Street Suite 100 | As of the date you file, the claim is: Check all that apply. ☐ Contingent | |
| | Unliquidated | |
| Week Below Beeck | ─ ☑ Disputed | |
| West Palm Beach FL 33409 City State ZIP Code | Type of NONDRIODITY upgequired eleims | |
| Who incurred the debt? Check one. | Type of NONPRIORITY unsecured claim: Student loans | |
| Debtor 1 only | ☐ Obligations arising out of a separation agreement or divorce | |
| Debtor 2 only | that you did not report as priority claims | |
| Debtor 1 and Debtor 2 only At least one of the debtors and another | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| Check if this claim is for a community debt | Other. Specify | |
| Is the claim subject to offset? | Conventional Real Estate Mortgage | |
| No | | |
| Yes | | |
| | | |
| 4.14 | | \$0.00 |
| Synchrony Bank/JCPenney Nonpriority Creditor's Name | _ Last 4 digits of account number _ 0 _ 7 _ 5 _ 8 _ | |
| Attn: Bankruptcy | When was the debt incurred? 12/1998 | |
| Number Street PO Box 965060 | As of the date you file, the claim is: Check all that apply. | |
| 1 O BOX 303000 | _ | |
| | Disputed | |
| Orlando FL 32896 City State ZIP Code | | |
| Who incurred the debt? Check one. | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 only | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce | |
| Debtor 2 only | that you did not report as priority claims | |
| Debtor 1 and Debtor 2 only | Debts to pension or profit-sharing plans, and other similar debts | |
| At least one of the debtors and another | Other. Specify | |
| Check if this claim is for a community debt | Charge Account | |
| Is the claim subject to offset? | | |
| ☑ No □ Yes | | |
| — | | |

| Debtor 1 | Thomas M. Chaffman | Case number (if known) | |
|----------|--|------------------------|--|
| Part 4: | Add the Amounts for Each Type of Unsecured Claim | | |

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

| | | | | Total claim |
|--------------------------|-----|---|--------------|-------------|
| Total claims from Part 1 | 6a. | Domestic support obligations | 6a. | \$0.00 |
| | 6b. | Taxes and certain other debts you owe the government | 6b. | \$0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. - | \$0.00 |
| | 6e. | Total. Add lines 6a through 6d. | 6d. | \$0.00 |
| | | | | Total claim |
| Total claims from Part 2 | 6f. | Student loans | 6f. | \$0.00 |
| | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. - | \$42,457.00 |
| | 6j. | Total. Add lines 6f through 6i. | 6j. | \$42,457.00 |

| Fill in this inf | ormation to iden | tify your case: | | |
|---------------------------------|------------------------|-------------------|-----------------------|------------------------------------|
| Debtor 1 | Thomas First Name | M. Middle Name | Chaffman Last Name | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States Ba | nkruptcy Court for the | DISTRICT OF MA | RYLAND | |
| Case number (if known) | | | | Check if this is an amended filing |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

 Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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| Fill in this i | nformation to | identify your case | : | | |
|-------------------------------|---|----------------------------|---|---|------|
| Debtor 1 | Thomas | М. | Chaffman | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse, if filir | ng) First Name | Middle Name | Last Name | | |
| United States | Bankruptcy Court fo | or the: DISTRICT OF | MARYLAND | | |
| Case number | | | | | |
| (if known) | | | | Check if this is an amended filing | |
| | | | | - | |
| Official For | m 106H | | | | |
| Schedule | H: Your Cod | lebtors | | | 12/1 |
| . • | op of any Addition | | ame and case number (if kno | wn). Answer every question. se as a codebtor.) | |
| | | | | (Community property states and territories (as, Washington, and Wisconsin.) | |
| Yes. | Go to line 3. Did your spouse, fo No Yes | ormer spouse, or legal e | quivalent live with you at the tin | ne? | |
| person she creditor or | own in line 2 agair n S <i>chedule D</i> (Offi | n as a codebtor only if | that person is a guarantor or dule E/F (Official Form 106E/ | or if your spouse is filing with you. List the cosigner. Make sure you have listed the F), or <i>Schedule G</i> (Official Form 106G). Use | |
| Column | 1: Your codebtor | | | Column 2: The creditor to whom you owe the | debt |

Check all schedules that apply:

page 1

Schedule H: Your Codebtors

Official Form 106H

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| Fill in this info | rmation to i | dentify your case: | | | | l | |
|---|--------------------------------|---|---|--------|----------------------|------------|---|
| Debtor 1 | Thomas | M. | Chaffma | n | | | |
| Deptor i | First Name | Middle Name | Last Name | | | Che | ck if this is: |
| Debtor 2 | First Name | Middle Norse | Lt No | | | $ _{\Box}$ | An amended filing |
| (Spouse, if filing) | First Name | Middle Name | Last Name F MARYLAND | | | <u>-</u> | A supplement showing postpetition |
| United States Bar Case number | ikruptcy Court | for the: DISTRICT OF | F WAR I LAND | | | _ | chapter 13 income as of the following date: |
| (if known) | | | | | | | MM / DD / YYYY |
| Official Form 1 | 1061 | | | | | | |
| Schedule I: Y | our Incon | ne | | | | | 12/15 |
| include information about your spouse. your name and case | about your sp If more space | ouse. If you are separe is needed, attach a se nown). Answer every o | ated and your spo parate sheet to th | use | is not filing | with y | spouse is living with you, ou, do not include information any additional pages, write |
| 1. Fill in your empinformation. | oloyment | | Debtor 1 | | | | Debtor 2 or non-filing spouse |
| If you have more job, attach a sep with information additional emplo | oarate page about | Employment status Occupation | ☐ Employed ☑ Not employe | ed | | | ☐ Employed ☑ Not employed |
| Include part-time or self-employed | | Employer's name | | | | | |
| Occupation may student or home applies. | | Employer's address | Number Street | | | | Number Street |
| | | | City | | State Zip C | ode | City State Zip Code |
| | | | • | | 5.0.15 <u>2.</u> p 5 | - | o.,, |
| | | How long employed the | nere ? | | | | |
| Part 2: Give | Details Abo | out Monthly Incom | е | | | | |
| Estimate monthly in non-filing spouse unl | | | n. If you have noth | ing to | o report for a | ny line | , write \$0 in the space. Include your |
| • . | • | | er, combine the info | orma | tion for all em | ıployeı | rs for that person on the lines below. If |
| you need more space | e, attach a sepa | arate sheet to this form. | | | | . , | · |
| | | | | | For Debtor | 1 | For Debtor 2 or non-filing spouse |
| | | nlary, and commissions monthly, calculate what | | 2. | \$ | 0.00 | <u>\$0.00</u> |
| 3. Estimate and li | st monthly ove | ertime pay. | | 3. | +\$ | 0.00 | \$0.00 |
| 4. Calculate gross | s income. Add | d line 2 + line 3. | | 4. | \$ | 0.00 | \$0.00 |

Official Form 106l Schedule I: Your Income page 1

| Deb | tor 1 | Thomas M. Chaffman | | Case num | nber | (if know | n) | | |
|-----|---------|--|--------------|------------------------|-------|-----------------------|----------|-----|-------------------------|
| | | | | For Debtor 1 | | or Debto on-filing | | ÷ | |
| | Сор | by line 4 here | 4. | \$0.00 | | | \$0.00 | _ | |
| 5. | List | all payroll deductions: | | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a. | \$359.10 | | | \$0.00 | | |
| | 5b. | Mandatory contributions for retirement plans | 5b. | \$0.00 | | | \$0.00 | | |
| | 5c. | Voluntary contributions for retirement plans | 5c. | \$0.00 | | | \$0.00 | | |
| | 5d. | Required repayments of retirement fund loans | 5d. | \$0.00 | | | \$0.00 | | |
| | 5e. | Insurance | 5e. | <u>\$164.90</u> | | \$10 | 64.90 | | |
| | 5f. | Domestic support obligations | 5f. | <u>\$0.00</u> | | | \$0.00 | | |
| | 5g. | Union dues | 5g. | \$0.00 | | | \$0.00 | | |
| | 5h. | Other deductions. Specify: | 5h.• | \$0.00 | | | \$0.00 | | |
| 6. | | I the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + + 5h. | 6. | \$524.00 | | \$10 | 64.90 | | |
| 7. | Cald | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | (\$524.00) | | (\$16 | 4.90) | | |
| 8. | List | all other income regularly received: | | | | | | | |
| | 8a. | Net income from rental property and from operating a business, profession, or farm | 8a. | \$0.00 | | | \$0.00 | | |
| | | Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | | | | | | | |
| | 8b. | Interest and dividends | 8b. | \$0.00 | | 9 | \$0.00 | | |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive | 8c. | \$0.00 | | | \$0.00 | | |
| | | Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | | | | | | | |
| | 8d. | Unemployment compensation | 8d. | \$0.00 | | , | \$0.00 | | |
| | 8e. | Social Security | 8e. | \$2,558.90 | | | 46.90 | | |
| | 8f. | Other government assistance that you regularly receive | | | | | _ | | |
| | | Include cash assistance and the value (if known) or any non- cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. | | | | | | | |
| | | Specify: | 8f. | \$0.00 | | 9 | \$0.00 | | |
| | 8g. | Pension or retirement income | - 8g. | \$0.00 | | | \$0.00 | | |
| | 8h. | Other monthly income. Specify: | 8h. - | | | | \$0.00 | | |
| 9. | Add | d all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. | 9. | \$2,558.90 | | \$1,3 | 46.90 |] | |
| 10. | | culate monthly income. Add line 7 + line 9. I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. | \$2,034.90 | +[| \$1,1 | 82.00 |]=[| \$3,216.90 |
| 11. | Stat | te all other regular contributions to the expenses that you list in S | chedi | ıle J. | | | | | |
| | Inclu | ude contributions from an unmarried partner, members of your househ nds or relatives. | iold, y | our dependents, you | r roc | ommates | , and ot | her | |
| | Do r | not include any amounts already included in lines 2-10 or amounts tha | t are ı | not available to pay e | xpe | nses liste | ed in Sc | hed | ule J. |
| | Spe | cify: | | | | | . 11. | + | \$0.00 |
| 12. | | If the amount in the last column of line 10 to the amount in line 11. | | | | | 12. | | \$3,216.90 |
| | if it a | applies. | | | ••• | -1 | | | Combined monthly income |
| 13. | | you expect an increase or decrease within the year after you file the | nıs fo | rm'? | | | | | |
| | | No. Yes. Explain: | | | | | | | |
| | | | | | | | | | |

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| Ē | Fill in this inform | ation to identi | fy your case: | | | Ola a | . 1. 16 41. 1. | •- | |
|----|---|----------------------|--|------------------|---|---------|----------------|--|---|
| | Debtor 1 | Thomas First Name | M. Middle Name | Chaff Last Na | | | | ended filing | |
| | Debtor 2 | First Name | Middle Name | Last Na | mo | | | ement showing 13 expenses as g date: | |
| | (Spouse, if filing) | | | | | | | | <u></u> |
| | United States Bankr | uptcy Court for the: | DISTRICT OF | MARYLANL |) | | MM / DI | D / YYYY | |
| | Case number (if known) | | | | | | | | |
| _ | fficial Form 10 | | | | | | | | |
| S | chedule J: Yo | ur Expense | S | | | | | | 12/15 |
| СО | | more space is ne | eded, attach anoth | ner sheet to t | ing together, both ar his form. On the top | | | | |
| F | Part 1: Descri | be Your House | hold | | | | | | |
| 1. | Is this a joint case | e? | | | | | | | |
| 2. | No | ebtor 2 live in a se | eparate household e Official Form 106 No | | s for Separate Housel | nold of | Debtor : | 2. | |
| | Do not list Debtor 2 Debtor 2. | 1 and | Yes. Fill out this in for each depender | | Dependent's relation Debtor 1 or Debtor | | to | Dependent's age | Does dependent live with you? |
| | Do not state the de names. | ependents' | | | | | | | Yes No No No Yes No Yes No No No No No Yes No Yes |
| 3. | Do your expenses expenses of peop yourself and your | le other than | ✓ No ☐ Yes | | | | | | |
| | Part 2: Estima | nte Your Ongoi | ng Monthly Ex | penses | | | | | |
| to | | of a date after the | | - | re using this form as supplemental Sched | - | - | • | |
| | clude expenses paid ch assistance and h | | - | - | | | | Your expens | es |
| 4. | | | enses for your resi any rent for the gro | | | | 4 | ł | |
| | If not included in | line 4: | | | | | | | |
| | 4a. Real estate ta | axes | | | | | 4 | la | |
| | 4b. Property, hom | neowner's, or renter | 's insurance | | | | 4 | lb | |
| | 4c. Home mainte | nance, repair, and | upkeep expenses | | | | 4 | łc | |
| | 4d. Homeowner's | association or con | dominium dues | | | | 4 | ld. | |

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| Debtor | 1 Thomas M. Chaffman | Case number (if known) | |
|--------|---|------------------------|-----------------|
| | | Your expense | s |
| 5. A | dditional mortgage payments for your residence, such as home equity loans | 5. | |
| 6. U | tilities: | | |
| 6 | a. Electricity, heat, natural gas | 6a | |
| 61 | o. Water, sewer, garbage collection | 6b | |
| 60 | c. Telephone, cell phone, Internet, satellite, and cable services | 6c | |
| 60 | d. Other. Specify: Cell Phones | 6d. | \$80.00 |
| 7. F | ood and housekeeping supplies | 7. | \$350.00 |
| 8. C | hildcare and children's education costs | 8. | |
| 9. C | lothing, laundry, and dry cleaning | 9. | \$50.00 |
| 10. P | ersonal care products and services | 10. | \$50.00 |
| 11. M | edical and dental expenses | 11. | \$697.00 |
| | ransportation. Include gas, maintenance, bus or train re. Do not include car payments. | 12. | \$175.00 |
| | ntertainment, clubs, recreation, newspapers, agazines, and books | 13. | \$100.00 |
| 14. C | haritable contributions and religious donations | 14. | |
| | surance. | | |
| | o not include insurance deducted from your pay or included in lines 4 or 20. | 45- | \$570.74 |
| | 5a. Life insurance | 15a | \$578.71 |
| | 5b. Health insurance | 15b | \$920.78 |
| | 5c. Vehicle insurance | 15c | \$365.00 |
| 16. Ta | 5d. Other insurance. Specify: axes. Do not include taxes deducted from your pay or included in lines 4 or 20. | 15d | |
| | pecify: | 16. | |
| 17. In | stallment or lease payments: | | |
| 1 | 7a. Car payments for Vehicle 1 Pet Care | 17a | \$100.00 |
| 1 | 7b. Car payments for Vehicle 2 | 17b | |
| 17 | 7c. Other. Specify: | 17c | |
| 17 | 7d. Other. Specify: | 17d | |
| | our payments of alimony, maintenance, and support that you did not report as educted from your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18. | |
| | ther payments you make to support others who do not live with you. | 19. | |

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| Deb | tor 1 | Thomas M. Chaffman | Case number (if known |) |
|-----|----------|---|-----------------------|------------|
| 20. | | r real property expenses not included in lines 4 or 5 of this form or on dule I: Your Income. | | |
| | 20a. | Mortgages on other property | 20a. | |
| | 20b. | Real estate taxes | 20b. | |
| | 20c. | Property, homeowner's, or renter's insurance | 20c. | |
| | 20d. | Maintenance, repair, and upkeep expenses | 20d. | |
| | 20e. | Homeowner's association or condominium dues | 20e. | |
| 21. | Other | r. Specify: | 21. + | |
| 22. | Calcu | ulate your monthly expenses. | _ | |
| | 22a. | Add lines 4 through 21. | 22a. | \$3,466.49 |
| | 22b. | Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106. | J-2. 22b. | |
| | 22c. | Add line 22a and 22b. The result is your monthly expenses. | 22c. | \$3,466.49 |
| 23. | Calcu | ulate your monthly net income. | | |
| | 23a. | Copy line 12 (your combined monthly income) from Schedule I. | 23a. | \$3,216.90 |
| | 23b. | Copy your monthly expenses from line 22c above. | 23b. _ | \$3,466.49 |
| | 23c. | Subtract your monthly expenses from your monthly income. The result is your monthly net income. | 23c. | (\$249.59) |
| 24. | Do yo | ou expect an increase or decrease in your expenses within the year after | you file this form? | |
| | | xample, do you expect to finish paying for your car loan within the year or do y ent to increase or decrease because of a modification to the terms of your mo | . , | |
| | V | No. | | |
| | | Yes. Explain here: None. | | |
| | | | | |
| | | | | |

| Debtor 1 | Thomas | М. | Chaffman | | |
|---|--|---|---|----------------------------|---|
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | \ = : | | | | |
| (Spouse, if filing | g) First Name | Middle Name | Last Name | | |
| United States B | ankruptcy Court fo | or the: DISTRICT OF | MARYLAND | | |
| Case number (if known) | | | | ☐ Check if the | nis is an |
| (II KIIOWII) | | | | amended | filing |
| Official Forr | n 106Sum | | | | |
| Summary o | of Your Asso | ets and Liabilit | ties and Certain Statis | tical Information | 12/1 |
| schedules after | | inal forms, you must t | then complete the information of ill out a new Summary and check | | |
| | | | | | |
| | | | | | our assets alue of what you own |
| 1. Schedule A | B: Property (Offici | al Form 106A/B) | | | , |
| 1a. Copy li | ne 55, Total real es | state, from Schedule A | /B | | \$0.00 |
| | | | | | *** |
| 1b. Copy li | ne 62, Total persoi | nal property, from Sche | edule A/B | | \$10,011.00 |
| 1c. Copyli | no 63 Total of all r | oronorty on Schodulo A | VB | Γ | \$10,011.00 |
| тс. Соруп | ne oo, Total of all p | Toperty on Schedule A | , D | | , ,,, |
| | ummariza Vou | ır Liabilities | | | |
| Part 2: S | ullillalize i ou | | | | |
| Part 2: S | ummanze rou | | | | Vour liabilities |
| Part 2: S | ummanze rou | | | | Your liabilities Amount you owe |
| | | ive Claims Secured by | Property (Official Form 106D) | | Amount you owe |
| 2 . Schedule D. | Creditors Who Ha | • | Property (Official Form 106D) f claim, at the bottom of the last page | | Amount you owe |
| Schedule D. Copy the schedule Expression | Creditors Who Ha ne total you listed i F: Creditors Who I | n Column A, Amount of Have Unsecured Claim | f claim, at the bottom of the last pages (Official Form 106E/F) | ge of Part 1 of Schedule D | Amount you owe \$0.00 |
| Schedule D. Copy the schedule Expression | Creditors Who Ha ne total you listed i F: Creditors Who I | n Column A, Amount of Have Unsecured Claim | f claim, at the bottom of the last page | ge of Part 1 of Schedule D | Amount you owe \$0.00 |
| Schedule D. 2a. Copy th Schedule E/ 3a. Copy th | Creditors Who Ha ne total you listed in F: Creditors Who I ne total claims fron | n Column A, Amount o Have Unsecured Claim n Part 1 (priority unsecu | f claim, at the bottom of the last pages (Official Form 106E/F) ured claims) from line 6e of Schedu | ge of Part 1 of Schedule D | Amount you owe \$0.00 |
| Schedule D. 2a. Copy th Schedule E/ 3a. Copy th | Creditors Who Ha ne total you listed in F: Creditors Who I ne total claims fron | n Column A, Amount o Have Unsecured Claim n Part 1 (priority unsecu | f claim, at the bottom of the last pages (Official Form 106E/F) | ge of Part 1 of Schedule D | \$0.00 \$0.00 |
| Schedule D. 2a. Copy th Schedule E/ 3a. Copy th | Creditors Who Ha ne total you listed in F: Creditors Who I ne total claims fron | n Column A, Amount o Have Unsecured Claim n Part 1 (priority unsecu | f claim, at the bottom of the last pages (Official Form 106E/F) ured claims) from line 6e of Schedu | ge of Part 1 of Schedule D | \$0.00 \$0.00 |
| Schedule D. Copy the schedule E/ Copy the schedule E/ Copy the schedule E/ | Creditors Who Ha ne total you listed in F: Creditors Who I ne total claims fron | n Column A, Amount o Have Unsecured Claim n Part 1 (priority unsecu | f claim, at the bottom of the last pages (Official Form 106E/F) ured claims) from line 6e of Schedu | ge of Part 1 of Schedule D | \$0.00 \$0.00 \$0.00 \$42,457.00 |
| Schedule D. 2a. Copy th Schedule E. 3a. Copy th 3b. Copy th | Creditors Who Ha ne total you listed in F: Creditors Who I ne total claims from ne total claims from | n Column A, Amount o Have Unsecured Claim n Part 1 (priority unsecu | f claim, at the bottom of the last pages (Official Form 106E/F) ured claims) from line 6e of Schedusecured claims) from line 6j of Schedusecured claims) from line 6j of Sche | ge of Part 1 of Schedule D | \$0.00 \$0.00 \$0.00 \$42,457.00 |

Schedule J: Your Expenses (Official Form 106J)

Copy your monthly expenses from line 22c of Schedule J.....

\$3,466.49

| Del | otor 1 | Thomas M. Chaffman Case nur | mber (if known) | | | |
|-----|--|--|--|--|--|--|
| Р | art 4: | Answer These Questions for Administrative and Statistical Rec | ords | | | |
| 6. | Are y | ou filing for bankruptcy under Chapters 7, 11, or 13? | | | | |
| | | lo. You have nothing to report on this part of the form. Check this box and submit this es | form to the court with your other schedules. | | | |
| 7. | What | kind of debt do you have? | | | | |
| | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. | | | | | |
| | | Your debts are not primarily consumer debts. You have nothing to report on this part his form to the court with your other schedules. | t of the form. Check this box and submit | | | |
| 8. | Official Form 122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14. \$3,905.80 | | | | | |
| 9. | Сору | the following special categories of claims from Part 4, line 6 of <i>Schedule E/F:</i> | | | | |
| | | | Total claim | | | |
| | From | Part 4 on <i>Schedule E/F,</i> copy the following: | | | | |
| | 9a. [| Comestic support obligations. (Copy line 6a.) | \$0.00 | | | |
| | 9b. T | axes and certain other debts you owe the government. (Copy line 6b.) | \$0.00 | | | |
| | 9c. (| Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$0.00 | | | |
| | 9d. S | Student loans. (Copy line 6f.) | <u>\$0.00</u> | | | |
| | | Obligations arising out of a separation agreement or divorce that you did not report as riority claims. (Copy line 6g.) | \$0.00 | | | |
| | 9f. [| Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$0.00 | | | |

9g. Total. Add lines 9a through 9f.

\$0.00

| Fill in this inf | ormation to i | dentify your case | e: | |
|--|----------------------|----------------------------|----------------------------|---|
| Debtor 1 | Thomas First Name | M. Middle Name | Chaffman Last Name | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | _ |
| United States Ba | nkruptcy Court fo | or the: DISTRICT OF | MARYLAND | _ |
| Case number (if known) | | | | Check if this is an amended filing |
| Official Form | 106Dec | | | |
| Declaration | About an I | ndividual Debt | tor's Schedules | 12/15 |
| concealing prope \$250,000, or impr | rty, or obtaining | money or property b | | nedules. Making a false statement, I a bankruptcy case can result in fines up to S19, and 3571. |
| Did you pay | or agree to pay s | someone who is NOT | an attorney to help you fi | Il out bankruptcy forms? |
| ☑ No | | | | |
| Yes. N | ame of person | | | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
| Hadan sanak | y of perjury, I de | | | |

Signature of Debtor 2

MM / DD / YYYY

Date

Thomas M. Chaffman, Debtor 1

Date <u>03/30/2023</u> MM / DD / YYYY

| | | | | _ | |
|---|----------------------|--|--------------------------------|--|--------|
| Fill in this in | formation to i | dentify your case | : | | |
| Debtor 1 | Thomas | М. | Chaffman | | |
| | First Name | Middle Name | Last Name | _ | |
| Debtor 2 | | | | _ | |
| (Spouse, if filing |) First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court fo | or the: DISTRICT OF | MARYLAND | | |
| Case number | | | | | |
| (if known) | | | _ | ☐ Check if this is an amended filing | |
| Official Forn | n 107 | | | | |
| | | Affaina fan Ind | iniduale Filine for | Dankmantar | 0.4/00 |
| Statement | of Financial | Affairs for ind | ividuals Filing for | Вапктиртсу | 04/22 |
| | • | nown). Answer every out Your Marital S | question. Status and Where You | Lived Before | |
| 1. What is you ✓ Married ☐ Not marr | r current marital | status? | | | |
| • | ast 3 years, have | you lived anywhere o | other than where you live n | ow? | |
| ☑ No □ Yes Lis | t all of the places | you lived in the last 3 y | rears. Do not include where | vou live now | |
| _ | | | | | |
| (Community | | • | • . | a community property state or territory? siana, Nevada, New Mexico, Puerto Rico, Texas, | |
| ☑ No | | | | | |
| ☐ Yes. Ma | ike sure you fill ou | t Schedule H: Your Co | debtors (Official Form 106H) | | |

| Deb | otor 1 | Thomas M. Chaffman | | Case nur | mber (if known) | |
|------|---------------|---|--|--|--|--|
| Р | art 2: | Explain the Sources of | Your Income | | | |
| 4. | Fill in the | have any income from employed total amount of income you receive filing a joint case and you have | eived from all jobs and all bu | sinesses, including par | t-time activities. | llendar years? |
| | □ No ☑ Yes | . Fill in the details. | | | | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions | Sources of income Check all that apply. | Gross income (before deductions and exclusions |
| | | ry 1 of the current year until filed for bankruptcy: | Wages, commissions, bonuses, tips | | Wages, commissions, bonuses, tips | |
| | uuto you | med for Samuaptoy. | Operating a business | | Operating a business | |
| | | ndar year: | ☐ Wages, commissions, bonuses, tips | | ☐ Wages, commissions, bonuses, tips | |
| (Jar | nuary 1 to | December 31, | Operating a business | | Operating a business | |
| For | the caler | ndar year before that: | ☐ Wages, commissions, bonuses, tips | | ☐ Wages, commissions, bonuses, tips | |
| (Jar | nuary 1 to | December 31, 2021) | Operating a business | | Operating a business | |
| 5. | Include i | receive any other income during income regardless of whether that byment; and other public benefit publing and lottery winnings. If you | nt income is taxable. Example ayments; pensions; rental in | les of other income are ncome; interest; dividen | ds; money collected from la | awsuits; royalties; |
| | List eacl | h source and the gross income fro | om each source separately. | Do not include income | that you listed in line 4. | |
| | ☐ No ✓ Yes | . Fill in the details. | | | | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Describe below. | Gross income from each source (before deductions and exclusions | Sources of income Describe below. | Gross income from each source (before deductions and exclusions |
| | | ry 1 of the current year until filed for bankruptcy: | Retirement | \$6,104.70 | | |
| For | last cale | ndar year: | 28700.00 | | | |
| (Jar | nuary 1 to | December 31, 2022) | | | | |
| | | ndar year before that: December 31, 2021) | 28700.00 | | | |

| Del | otor 1 | Thomas M. Ch | affma | n | | | Case number (if kno | own) |
|--|---------------|-----------------------------------|-------------|-----------------------|--|--|-------------------------|---|
| Р | art 3: | List Certain | Payn | nents You Ma | ade Before ` | You Filed for Ba | ınkruptcy | |
| 6. | Are eith | er Debtor 1's or | Debtor | · 2's debts prim | arily consume | r debts? | | |
| | □ No. | | | - | - | ı mer debts. <i>Consul</i> mily, or household pu | | ed in 11 U.S.C. § 101(8) as |
| | | During the 90 o | days be | efore you filed fo | r bankruptcy, d | id you pay any credit | tor a total of \$7,575 | or more? |
| | | ☐ No. Go to I | ine 7. | | | | | |
| | | total a | amount | you paid that cr | reditor. Do not | total of \$7,575* or r include payments fo ude payments to an | r domestic support o | obligations, such as |
| | | * Subject to ad | justme | nt on 4/01/25 an | d every 3 years | after that for cases | filed on or after the | date of adjustment. |
| | √ Yes | Debtor 1 or De | ebtor 2 | or both have p | rimarily consu | ımer debts. | | |
| | _ | During the 90 o | days be | efore you filed fo | r bankruptcy, d | id you pay any credit | tor a total of \$600 or | more? |
| | | ☑ No. Go to I | ine 7. | | | | | |
| | | credit | or. Do | not include pay | ments for dome | total of \$600 or morestic support obligations that the support obligation is the support of the | ons, such as child s | |
| 7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managin agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligation such as child support and alimony. | | | | | which you are a general partner; ing securities; and any managing | | | |
| | ✓ No ☐ Yes | . List all payment | s to an | insider. | | | | |
| 8. | | year before you ed an insider? | filed f | or bankruptcy, | did you make | any payments or tr | ansfer any propert | y on account of a debt that |
| | Include | payments on deb | s guar | anteed or cosigr | ned by an inside | er. | | |
| | □ No ✓ Yes | . List all payment | s that b | penefited an insi | der. | | | |
| | | | | | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment Include creditor's name |
| Shellie Baskerville Insider's name 5608 Chatham Road Number Street | | | — — | | _ | Transferred interest in vehicle to daughter Shellie Baskerville - co owner of each vehicle. | | |
| Bro | ooklyn P | ark | MD State | 21225 ZIP Code | _ | | | |

| Deb | tor 1 | Thomas M. Chaffmar | 1 | Case number (| (if known) _ | | |
|---|------------------------|--|---|---|---------------|-----------------------|-----------------------------|
| P | art 4: | Identify Legal Act | ons, Repossessions, an | d Foreclosures | | | |
| 9. | List all s modifica | | rsonal injury cases, small claims | ty in any lawsuit, court action, c s actions, divorces, collection suit | | | |
| Dis Cha | e title | ank v. Thomas M. | Nature of the case | Court or agency District Court for Court Name 501 E. Fayette St Number Street | | | Pending On appeal Concluded |
| | | | | Baltimore City | MD State | 21202 ZIP Code | _ |
| Case title Bank of America v. Thomas Chaffman Case number 010100157262022 | | | Nature of the case | Court or agency District Court of City Court Name 501 E. Fayette St | | | Pending On appeal Concluded |
| | | | | Baltimore City | MD State | 21202 ZIP Code | |
| 10. | seized, Check a | or levied? all that apply and fill in the | | r property repossessed, foreclo | osed, garnis | shed, attach | ed, |
| | ت | Go to line 11. Fill in the information be | elow. | | | | |
| 11. | | | for bankruptcy, did any credit refuse to make a payment be | or, including a bank or financia cause you owed a debt? | l institution | ı, set off any | |
| | ✓ No | . Fill in the details. | | | | | |
| 12. | | | or bankruptcy, was any of you eiver, a custodian, or another | r property in the possession of official? | an assigne | e for the bei | nefit of |
| | ✓ No ☐ Yes | | | | | | |

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| Deb | otor 1 | Thomas M. Ch | naffman | | Case number (if known) | | |
|--|----------------|--------------------------------------|---------------------|---|----------------------------|--------------------------|-------------------|
| P | art 5: | List Certain | Gifts and Co | ontributions | | | |
| 13. | Within | 2 years before y | ou filed for bank | ruptcy, did you give any gifts with a to | otal value of more than \$ | 600 per perso | n? |
| | ✓ No ☐ Yes | s. Fill in the detail | ls for each gift. | | | | |
| 14. | | 2 years before ye charity? | ou filed for bank | ruptcy, did you give any gifts or contr | ibutions with a total valu | ie of more tha | n \$600 |
| | ☑ No □ Yes | s. Fill in the detail | ls for each gift or | contribution. | | | |
| P | art 6: | List Certain | Losses | | | _ | |
| 15. | | 1 year before yo isaster, or gamb | | uptcy or since you filed for bankruptc | y, did you lose anything | because of th | eft, fire, |
| | ✓ No | s. Fill in the detail | ls. | | | | |
| Р | art 7: | List Certain | Payments o | r Transfers | | | |
| Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required for your bankruptcy. No ✓ Yes. Fill in the details. | | | | | | • | |
| Cre | — edit Solu | ıtions Plus | | Description and value of any propost | • | e payment ransfer was | Amount of payment |
| | on Who W | | | _ | mac | e | |
| 713 Num | | ty Road eet | | _ | | | |
| _ | timore | MC | | _ | | | |
| City | | Sta | ie Zir Code | | | | |
| Ema | il or websi | te address | | _ | | | |
| Pers | on Who M | lade the Payment, if | Not You | _ | | | |
| 17. | anyone | who promised t | to help you deal | uptcy, did you or anyone else acting o with your creditors or to make payme at you listed on line 16. | | nsfer any prop | perty to |
| | ✓ No ☐ Yes | s. Fill in the detail | ls. | | | | |

| Debte | Debtor 1 Thomas M. Chaffman | | | | Case number (if known) | | |
|--|-----------------------------|-------------------------------------|----------------------|-----------------------------------|--|--|------------------------|
| | | - | - | | uptcy, did you sell, trade, or otherwise rse of your business or financial affairs | e transfer any property to anyone, other s? | than |
| | | _ | | | s made as security (such as granting of a nave already listed on this statement. | a security interest or mortgage on your pro | pperty). |
| | □ No ☑ Yes | s. Fill in the | details. | | | | |
| Shel | lie Cha | affman-Bas | skervill | e | Description and value of property transferred | Describe any property or payments received or debts paid in exchange | Date transfer was made |
| Perso | n Who R | Received Transi ham Road reet | | | 2014 Chevy Equinox LS removed name from joint title with daughter | \$0.00 | 01/23 |
| Broc | oklyn | | MD State | 21225 ZIP Code | - | | |
| Perso | on's rela | ationship to y | ∕ou <mark>dau</mark> | ghter | Description and value of | Describe any property or payments | Date transfer |
| | | affman-Bas | | е | property transferred 2013 Honda Pilot jointly titled | received or debts paid in exchange \$0.00 | was made |
| Person Who Received Transfer 5608 Chatham Road Number Street | | | | | with daughter - she made all payments debtor was merely on title to assist with purchase | \$0.00 | 01/23 |
| Balti City | imore | | MD State | 21225 ZIP Code | _ | | |
| Perso | on's rela | ationship to y | ou <u>dau</u> | ghter | _ | | |
| : | you are | - | - | | truptcy, did you transfer any property to called asset-protection devices.) | to a self-settled trust or similar device o | of which |
| | ✓ No ☐ Yes | s. Fill in the | details. | | | | |
| Pa | rt 8: | List Cer | rtain F | inancial Acc | counts, Instruments, Safe Depo | sit Boxes, and Storage Units | |
| | | - | - | led for bankru ed, or transfer | | nstruments held in your name, or for yo | our |
| | | • | • | • | or other financial accounts; certificates o ciations, and other financial institutions. | f deposit; shares in banks, credit unions, | brokerage |
| | ☑ No □ Yes | s. Fill in the | details. | | | | |
| | | | | | | | |

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| Deb | otor 1 | Thomas M. Chaffman Cas | e number (if known) | | | | |
|-----|--|--|---|--|--|--|--|
| 21. | - | ou now have, or did you have within 1 year before you filed for bankruptcy, and curities, cash, or other valuables? | y safe deposit box or other depository | | | | |
| | ✓ No ☐ Yes | o es. Fill in the details. | | | | | |
| 22. | ☑ No | you stored property in a storage unit or place other than your home within 1 to es. Fill in the details. | year before you filed for bankruptcy? | | | | |
| P | art 9: | Identify Property You Hold or Control for Someone Else | | | | | |
| 23. | • | ou hold or control any property that someone else owns? Include any proper d in trust for someone. | ty you borrowed from, are storing for, | | | | |
| | ✓ No ☐ Yes | o es. Fill in the details. | | | | | |
| Ρ | art 10: | Give Details About Environmental Information | | | | | |
| For | the purp | rpose of Part 10, the following definitions apply: | | | | | |
| ı | ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substance, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. | | | | | | |
| | | eans any location, facility, or property as defined under any environmental law t or used to own, operate, or utilize it, including disposal sites. | v, whether you now own, operate, or | | | | |
| | Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar item. | | | | | | |
| Rep | ort all n | notices, releases, and proceedings that you know about, regardless of when | they occurred. | | | | |
| 24. | Has any law? | ny governmental unit notified you that you may be liable or potentially liable | under or in violation of an environmental | | | | |
| | ✓ No ☐ Yes | o es. Fill in the details. | | | | | |
| 25. | ✓ No | you notified any governmental unit of any release of hazardous material? o es. Fill in the details. | | | | | |
| 26. | Have you | you been a party in any judicial or administrative proceeding under any envir s. | onmental law? Include settlements and | | | | |
| | ✓ No ☐ Yes | o es. Fill in the details. | | | | | |
| | | | | | | | |

| Del | otor 1 | Thomas M. Chaffman | | Case number (if known) | | | |
|--------------------|--|---|---|---|--|--|--|
| P | art 11: | Give Details About Your Busines | s or Connections to A | Any Business | | | |
| 27. | Within 4 | | d you own a business or ha | ave any of the following connections to any | | | |
| | | A sole proprietor or self-employed in a trade A member of a limited liability company (LL A partner in a partnership An officer, director, or managing executive An owner of at least 5% of the voting or equ | C) or limited liability partners of a corporation | hip (LLP) | | | |
| | ب | None of the above applies. Go to Part 12. Check all that apply above and fill in the de | etails below for each busines | s. | | | |
| 28. | | 2 years before you filed for bankruptcy, did acial institutions, creditors, or other parties | • • | ment to anyone about your business? Include | | | |
| | □ No □ Yes | . Fill in the details below. | | | | | |
| P | art 12: | Sign Below | | | | | |
| tha pro or l | have read the answers on this <i>Statement of Financial Affairs</i> and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. | | | | | | |
| | | nas M. Chaffman M. Chaffman, Debtor 1 | Signature of Debtor 2 | | | | |
| | Date | 03/30/2023 | Date | | | | |
| Did | l you atta | ch additional pages to Your Statement of F | Financial Affairs for Individ | uals Filing for Bankruptcy (Official Form 107)? | | | |
| | No Yes | | | | | | |
| Dic | l you pay | or agree to pay someone who is not an at | torney to help you fill out b | ankruptcy forms? | | | |
| _ | No Yes. Na | me of person | | Attach the Bankruptcy Petition Preparer's Notice, | | | |
| | | | | Declaration, and Signature (Official Form 119). | | | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

- You are an individual filing for bankruptcy, and
- Your debts are primarily consumer debts.
 Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 -- Liquidation
- Chapter 11 -- Reorganization
- Chapter 12 -- Voluntary repayment plan for family farmers or fishermen
- Chapter 13 -- Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

| + | \$78 | filing fee administrative fee trustee surcharge |
|---|-------|---|
| | \$338 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that the even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans:
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form--the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form-sometimes called the *Means Test*--deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If your income is more than the median income

for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| + | | filing fee administrative fee |
|---|---------|----------------------------------|
| | \$1,738 | total fee |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| + | | filing fee administrative fee |
|---|-------|----------------------------------|
| | \$278 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| + | | filing fee administrative fee |
|---|-------|----------------------------------|
| | \$313 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers.
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/forms/bankruptcy-forms

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury--either orally or in writing--in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together-called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtoreducation-courses.

In Alabama and North Carolina, go to:

http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtoreducation-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

UNITED STATES BANKRUPTCY COURT DISTRICT OF MARYLAND BALTIMORE DIVISION

IN RE: Thomas M. Chaffman CASE NO

CHAPTER 7

VERIFICATION OF CREDITOR MATRIX

| | The above named D | ebtor hereby verifie | s that the a | attached list of | creditors is tru | e and correct to | the best of h | is/her |
|------|-------------------|----------------------|--------------|------------------|------------------|------------------|---------------|--------|
| knov | /ledge. | | | | | | | |

| Date 3/30/2023 | Signature <u>/s/ Thomas M. Chaffman</u> |
|----------------|---|
| | Thomas M. Chaffman |
| Date | Signature |

Ally Financial, Inc Attn: Bankruptcy 500 Woodard Ave Detroit, MI 48226

Amex Correspondence/Bankruptcy PO Box 981540 El Paso, TX 79998

Bank of America Attn: Bankruptcy 4909 Savarese Circle Tampa, FL 33634

Capital One Attn: Bankruptcy PO Box 30285 Salt Lake City, UT 84130

CarMax Auto Finance Attn: Bankruptcy PO Box 440609 Kennesaw, GA 30160

Citibank/Office Depot Citicorp Credit Srvs/Centralized Bk dept PO Box 7032 Sioux Falls, SD 57117

Discover Financial Attn: Bankruptcy PO Box 3025 New Albany, OH 43054

Lendmark 2118 Usher St. Covington, GA 30014

Lendmark Financial Ser 2118 Usher St.
Covington, GA 30014

Navy FCU Attn: Bankruptcy P.O. Box 3000 Merrifield, VA 22119

Ocwen Loan Servicing, LLC 1661 Worthington Road Suite 100 West Palm Beach, FL 33409

Synchrony Bank/JCPenney Attn: Bankruptcy PO Box 965060 Orlando, FL 32896 Debtor(s): Thomas M. Chaffman

Case No: Chapter: **7** DISTRICT OF MARYLAND
BALTIMORE DIVISION

Ally Financial, Inc Attn: Bankruptcy 500 Woodard Ave Detroit, MI 48226 Ocwen Loan Servicing, LLC 1661 Worthington Road Suite 100 West Palm Beach, FL 33409

Amex Correspondence/Bankruptcy PO Box 981540 El Paso, TX 79998 Synchrony Bank/JCPenney Attn: Bankruptcy PO Box 965060 Orlando, FL 32896

Bank of America Attn: Bankruptcy 4909 Savarese Circle Tampa, FL 33634

Capital One Attn: Bankruptcy PO Box 30285 Salt Lake City, UT 84130

CarMax Auto Finance Attn: Bankruptcy PO Box 440609 Kennesaw, GA 30160

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